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Alabama Board of Nursing

May 10, 2004

N. Genell Lee, MSN, JD, RN
Executive Officer
Alabama Board of Nursing
770 Washington Avenue
RSA Plaza, Suite 250
Montgomery, AL 36104-3900

Dear Ms. Lee:

The American Society of Anesthesiologists and the American Association of Nurse Anesthetists have developed the enclosed brief Joint Statement Regarding Propofol Administration in response to numerous requests for our positions on this patient safety issue. In addition to this joint statement, both of our organizations have additional patient safety and sedation information available on their respective web sites or through their national offices.

We are sending this letter and the enclosed joint statement to make you aware of the patient safety issues related to the use of propofol for sedation by unqualified individuals and to hopefully provide information that will assist all of us in providing the best possible care for our patients.

If you have any questions regarding this joint statement or issues of anesthesia patient safety, please do not hesitate to visit our web sites or to contact either of our organizations directly.

Sincerely,



Roger W. Litwiller, MD
ASA President



Tom L. McKibban, CRNA, MS
AANA President



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AANA-ASA Joint Statement Regarding Propofol Administration*

April 14, 2004

Because sedation is a continuum, it is not always possible to predict how an individual patient will respond. Due to the potential for rapid, profound changes in sedative/anesthetic depth and the lack of antagonistic medications, agents such as propofol require special attention.

Whenever propofol is used for sedation/anesthesia, it should be administered only by persons trained in the administration of general anesthesia, who are not simultaneously involved in these surgical or diagnostic procedures. This restriction is concordant with specific language in the propofol package insert, and failure to follow these recommendations could put patients at increased risk of significant injury or death.

Similar concerns apply when other intravenous induction agents are used for sedation, such as thiopental, methohexital or etomidate.

**This statement is not intended to apply when propofol is given to intubated, ventilated patients in a critical care setting.*



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